

## **HEALTH ANNUAL STATEMENT**

# FOR THE YEAR ENDING DECEMBER 31, 2007 OF THE CONDITION AND AFFAIRS OF THE

**Priority Health** 

	3383 , <u>3383</u> ent Period) (Prior Perio		Code <u>95561</u>	Employer's ID Numb	per 38-2715520		
Organized under the Laws of	, , , , , , , , , , , , , , , , , , , ,	,	_, State of Domicile or	Port of Entry	Michigan		
Country of Domicile			United States	_			
Licensed as business type:	Life, Accident & Health [	] Property/Ca	asualty [ ] Dental	Service Corporation [	]		
	Vision Service Corporation	on [ ] Other [ ]	Health	Maintenance Organizat	ion [X]		
	Hospital, Medical & Dent	al Service or Indemnity	[ ] Is HMO	ጋ, Federally Qualified? ነ	res[] No[X]		
Incorporated/Organized	03/07/1986	3 Co	mmenced Business	10/1	5/1986		
Statutory Home Office	1221 =	ast Beltline NE	_	Grand Rapids, MI 4	10525 4501		
Statutory Home Office		et and Number)	,	(City or Town, State an			
Main Administrative Office			1231 East Beltline N	NE			
Grand F	Rapids, MI 49525-4501		(Street and Number)	616-942-0954			
	Town, State and Zip Code)		(A	rea Code) (Telephone Number)	1		
Mail Address	1231 East Beltline		i	Grand Rapids, MI 4952			
	(Street and Number or P.0	D. Box)		(City or Town, State and Zip	Code)		
Primary Location of Books a	nd Records			t Beltline NE			
	Rapids, MI 49525-4501			616-464-8926			
, ,	Town, State and Zip Code)			rea Code) (Telephone Number)	l .		
Internet Website Address			www.priority-health.com	1			
Statutory Statement Contact		Shoemaker Name)		616-464-8926 (Area Code) (Telephone Numb			
kristy.shoer	maker@priority-health.com		(Area Code) (Telephone Number) (Extension) 616-942-7916				
	(E-mail Address)			(FAX Number)			
		OFFICE	=De				
Name		Title	Name		Title		
Kimberly K Horn		ef Executive Officer	Judith W Hooye	enga ,	Secretary		
Gregory A Hawkins #	t Treasurer / Chi	ef Financial Officer	•		•		
		OTHER OF	FICERS				
		DIRECTORS OF					
Dennis Aloia Gaylen J Byker		H Baldwin  D Deck	Craig H Bethur Georgia R Fojtaje		Richard C Breon Michael P Freed		
Lynn Kotecki		ael I Love	Peter B Lunde		Christina MacInnes		
Edward M Millermaier		en S Ponitz	Stephen B Rezni	icek	Robert W Roth		
Thomas G Schwadere James J Stephanak		ny V Smith Vanderwel	Hilary F Snell Douglas A Zwem		Dale M Sowders		
James o Otephanak	30dy D	variderwei	Douglas A Zwein	<u>υ π</u>			
State of	_Michigan						
County of	Kent	SS					
The officers of this reporting enti above, all of the herein described							
this statement, together with rela	ted exhibits, schedules and ex	planations therein contained	I, annexed or referred to is	a full and true statement of	all the assets and liabilities an		
of the condition and affairs of the completed in accordance with the							
that state rules or regulations req	quire differences in reporting no	ot related to accounting prac-	tices and procedures, acco	ording to the best of their info	ormation, knowledge and belie		
respectively. Furthermore, the so exact copy (except for formatting							
to the enclosed statement.		mg, or are enclosed clatering	3.1 1.1.0 0.000.01 mg 1.1.0	y so requested by runeus is	2guiato. 0 ou o. o auditu		
Kimberly K	Horn	Judith W Ho	oovenga	Gregor	ry A Hawkins		
President / Chief Ex		Secret			hief Financial Officer		
			a leth	nis an original filing?	Yes [ X ] No [		
Subscribed and sworn to be			b. If no		[ ] [ ]		
day of	February, 2008			tate the amendment nur	nber		
				ate filed umber of pages attached			
Cheryl Britcher			J. IN	amber or pages attached			
Executive Administrative Ass 12/30/2011	sistant						
12/00/2011							

## **EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

EXHIBIT 2 - ACC	-					
1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals						
Group subscribers: MI PUBLIC SCHOOL EMPLOYEE RET						
MI PÜBLIC SCHOOL EMPLOYEE RET		517,709	0	1,046	1,046	2,741,991
STATE OF MICHIGAN	1,588,285	40,880	32,273	84,985	84,985	1,661,438
STEELCASE INC	1,307,159	0	0	0	0	1,307,159
0299997 Group subscriber subtotal	5,119,727	558,589	32,273		86,031	5,710,588
0299998 Premiums due and unpaid not individually listed	4,245,245	887,492	70,559	243,919	243,919	5,203,297
0299999 Total group	9,364,972	1,446,081	102,832	329,950	329,950	10,913,885
0399999 Premiums due and unpaid from Medicare entities		0	0	0	0	809,420
0499999 Premiums due and unpaid from Medicaid entities	<u> </u>					
0599999 Accident and health premiums due and unpaid (Page 2, Line 13)	10,174,392	1,446,081	102,832	329,950	329,950	11,723,305

EXHIBIT 3 - H	EALTH CAR	RE RECEIVA	BLES		EXHIBIT 3 - HEALTH CARE RECEIVABLES										
1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted									
Individually Listed Receivables: Express Scripts	1,686,480	1,714,074	1,475,000	2,358,386	2,358,386	4,875,554									
0199998 - Aggregate of amounts not individually listed above.				202	202										
0199999 - Totals - Pharmaceutical rebate receivables	1,686,480	1,714,074	1,475,000	2,358,588	2,358,588	4,875,554									
0299998 - Aggregate of amounts not individually listed above.	546.042	242.891	.304 . 162	162.594	162.594	1,093,095									
0299999 - Totals - Claim Overpayment Receivables	546,042	242,891	304.162		162.594	1,093,095									
039999 - Totals - Loans and Advances to Providers	0	212,001	001,102	0	0	0									
0699998 - Aggregate of amounts not individually listed above.	649 , 160	.76,153	8,360												
0699999 - Totals - Other Receivables	649,160	76.153	8,360	14.451		733.673									
OCCOUNT TOTAL CONTRACTOR			5,000												
						<b>.</b>									
					<b> </b>	<b></b>									
						ļ									
0799999 Gross health care receivables	2,881,682	2,033,118	1,787,522	2,535,633	2,535,633	6,702,322									

## **EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims												
1	2	3	4	5	6	7						
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total						
Claims Unpaid (Reported)												
						· ·						
						1						
						+						
						· †						
0199999 Individually listed claims unpaid.	0	0	0	0	0	0						
0299999 Aggregate accounts not individually listed-uncovered.	2,086,131					2,086,131						
0399999 Aggregate accounts not individually listed-covered	25,386,990					25,386,990						
0499999 Subtotals	27,473,121	0	0	0	0	27,473,121						
0599999 Unreported claims and other claim reserves						75,895,523						
0699999 Total amounts withheld	·	·	·	·	·	13,799						
0799999 Total claims unpaid						103,382,443						
0899999 Accrued medical incentive pool and bonus amounts	·			·	·	17,652,309						

## **EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES**

	2	3	4	5	6	Adm	itted
·	_	•			_	7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
Individually Listed Receivables:							
Priority Health Managed Benefits, Inc.	1,601,888 714,595					1,601,888	
Spectrum Health	714,595					714,595	
Individually Listed Receivables: Priority Health Managed Benefits, Inc	485,417					485,417	
							•
0199999 Individually listed receivables	2,801,900	0	0	0	0	2,801,900	
0299999 Receivables not individually listed	95,722					95,722	
0399999 Total gross amounts receivable	2,897,622		0	0	0	2,897,622	

## EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Priority Health Managed Benefits, Inc Priority Health Insurance Company	Trade	4,568,833 3,017,960	4,568,833	0
Priority Health Insurance Company	Trade	3,017,960	3,017,960	0
0199999 Individually listed payables		7 , 586 , 793	7 ,586 ,793	0
0199999 Individually listed payables 0299999 Payables not individually listed		832,148	832,148	0
0399999 Total gross payables		8,418,941	8,418,941	0

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#### ANNUAL STATEMENT FOR THE YEAR 2007 OF THE Priority Health

#### **EXHIBIT 7 PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS**

EXHIBIT TEACH TO COMMENT OF THAT CAST ON WITH THE WORLD												
Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers						
Capitation Payments:												
1. Medical groups	37,488,379	3.0		0.0	37,488,379							
2. Intermediaries	0	0.0		0.0								
3. All other providers	26 , 577 , 724	2.1		0.0	26 , 577 , 724							
Total capitation payments	64,066,103	5.1	0	0.0	64,066,103	0						
Other Payments:												
5. Fee-for-service	98,349,424	7.9	XXX	XXX	292,410							
6. Contractual fee payments	646 ,835 ,181	52.0	XXX	XXX	496 . 178 . 234	150,656,947						
7. Bonus/withhold arrangements - fee-for-service	174	0.0	XXX	XXX	· · · ·	174						
Bonus/withhold arrangements - contractual fee payments	435,752,919	35.0	XXX	XXX	408 , 740 , 884	27 , 012 , 035						
9. Non-contingent salaries	0	0.0	XXX	XXX								
10. Aggregate cost arrangements	0	0.0	XXX	XXX								
11. All other payments	0	0.0	XXX	XXX								
12. Total other payments	1,180,937,698	94.9	XXX	XXX	905,211,528	275,726,170						
13. Total (Line 4 plus Line 12)	1,245,003,801	100 %	XXX	XXX	969, 277, 631	275,726,170						

#### **EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

1	2	3	4 Average Monthly	5 Intermediary's	6 Intermediary's Authorized
NAIC Code	Name of Intermediary	Capitation Paid	Capitation	Intermediary's Total Adjusted Capital	Control Level RBC
	NONE				
9999999 Totals			XXX	XXX	XXX

## **EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED**

·	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
Administrative furniture and equipment	2,110,438		(1,903,376)	207,062	207,062	
Medical furniture, equipment and fixtures						
Pharmaceuticals and surgical supplies						
Durable medical equipment						
Other property and equipment	15,984,793		(5,733,649)	10,251,114	10,251,114	
6. Total	18,095,231	0	(7,637,025)	10,458,176	10,458,176	0



## **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

**REPORT FOR: 1. CORPORATION** Priority Health

AIC Group Code 3383 BUSINESS IN THE STATE OF Michigan				DURING THE YEAR 2007				NA	95561	
	1	Comprel (Hospital 8		4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	436,357	1,209	429,662					5,486		
2 First Quarter	413,773	1,094	406,420					6,259		
3 Second Quarter	405,636	1 , 122	397,948					6,566		
4. Third Quarter	399,474	1,091	391,011					7,372		
5. Current Year	398, 183	1,090	389,365					7,728		
6 Current Year Member Months	4,871,980	13,332	4,776,647					82,001		
Total Member Ambulatory Encounters for Year:										
7. Physician	4,372,165	11,321	4,220,814					140,030		
8. Non-Physician	763,628	307	759,524					3,797		
9. Total	5,135,793	11,628	4,980,338	0	0	0	0	143,827	0	0
10. Hospital Patient Days Incurred	112,127	213	102,541					9,373		
11. Number of Inpatient Admissions	26,850	55	25,332					1,463		
12. Health Premiums Written (b)	1,376,076,940	4,003,628	1,319,093,101					52,980,211		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	1,375,182,101	4,000,942	1,318,208,115					52,973,044		
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	1,245,003,801	4,676,490	1, 194, 887, 742					45 , 439 , 569		
18. Amount Incurred for Provision of Health Care Services	1,241,178,965	4,670,262	1,188,424,535					48,084,168		

(a) For health business: number of persons insured under PPO managed care products and number of persons under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes of fees \$ \_\_\_\_\_\_0



## **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

**REPORT FOR: 1. CORPORATION** Priority Health BUSINESS IN THE STATE OF Consolidated DURING THE YEAR 2007

AIC Group Code 3383 BUSINESS IN THE STATE	OF Consolidated			DURING THE YEAR	2007			NA	IC Company Code	95561	
	1	Comprehensive 1 (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
Total Members at end of:	Total	ilidividuai	Group	Supplement	Offig	Offity	Flaii	iviedicare	iviedicaid	Otilei	
1. Prior Year	436.357	1.209	429,662	0	0	0	0	5.486	0	(	
2 First Quarter	413,773	1,094	406,420	0	0	0	0	6,259	0		
3 Second Quarter	405,636	1 , 122	397,948	0	0	0	0	6,566	0	(	
4. Third Quarter	399,474	1,091	391,011	0	0	0	0	7,372	0	(	
5. Current Year	398, 183	1,090	389,365	0	0	0	0	7,728	0	(	
6 Current Year Member Months	4,871,980	13,332	4,776,647	0	0	0	0	82,001	0	(	
Total Member Ambulatory Encounters for Year:											
7. Physician	4,372,165	11,321	4,220,814	0	0	0	0	140,030	0		
8. Non-Physician	763,628	307	759,524	0	0	0	0	3,797	0		
9. Total	5,135,793	11,628	4,980,338	0	0	0	0	143,827	0		
10. Hospital Patient Days Incurred	112,127	213	102,541	0	0	0	0	9,373	0	(	
11. Number of Inpatient Admissions	26,850	55	25,332	0	0	0	0	1,463	0	(	
12. Health Premiums Written (b)	1,376,076,940	4,003,628	1,319,093,101	0	0	0	0	52,980,211	0		
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0		
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0		
15. Health Premiums Earned	1,375,182,101	4,000,942	1,318,208,115	0	0	0	0	52,973,044	0		
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0		
17. Amount Paid for Provision of Health Care Services	1,245,003,801	4,676,490	1 , 194 , 887 , 742	0	0	0	0	45 , 439 , 569	0	(	
18. Amount Incurred for Provision of Health Care Services	1,241,178,965	4,670,262	1,188,424,535	0	0	0	0	48,084,168	0	(	

(a) For health business: number of persons insured under PPO managed care products and number of persons under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes of fees \$ \_\_\_\_\_\_0

## **SCHEDULE A - VERIFICATION BETWEEN YEARS**

Real Estate

1.	Book/adjusted carrying value, December 31, prior year.	0
2.	Increase (decrease) by adjustment:	
	2.1 Totals, Part 1, Column 11	0
	2.2 Totals, Part 3, Column 8	0
3.	Cost of acquired, (Totals, Part 2, Column 6, net of encumbances Column 2)	0
4.	Cost of additions and permanent improvements:	
	4.1 Totals, Part 1, Column 14	0
	4.2 Totals, Part 3, Column 10	0
5.	Total profit (loss) on sales, Part 3, Column 15	0
6.	Increase (decrease) by foreign exchange adjustment:	
	6.1 Totals, Part 1, Column 12	0
	6.2 Totals, Part 3, Column 9	0
7.	Amounts received on sales, Part 3, Column 12 and Part 1, Column 13	0
8.	Book/adjusted carrying value at end of current period	0
9.	Total valuation allowance	
	Subtotal (Lines 8 plus 9)	0
11.	Total nonadmitted amounts	
12.	Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	0

## **SCHEDULE B - VERIFICATION BETWEEN YEARS**

Mortgage Loans

1.	Book value/recorded investment excluding accrued interes of montage and ed. I be certain a second of the control of the contro
2.	Amount loaned during year:
	2.1 Actual cost at time of acquisitions
	2.2 Additional investment made after acquisitions0
3.	Accrual of discount and mortgage interest points and commitment fees
4.	Increase (decrease) by adjustment
5.	Total profit (loss) on sale
6.	Amounts paid on account or in full during the year
	Amortization of premium
8.	Increase (decrease) by foreign exchange adjustment
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period
10.	Total valuation allowance
11.	Subtotal (Lines 9 plus 10)
12.	Total nonadmitted amounts
13.	Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)

## **SCHEDULE BA - VERIFICATION BETWEEN YEARS**

Long-Term Invested Assets

1.	Book/adjusted carrying value of long-term invested assets and December 1 of the property and the property an
2.	Cost of acquisitions during year:
	2.1 Actual cost at time of acquisitions
	2.2 Additional investment made after acquisitions
3.	Accrual of discount
4.	Increase (decrease) by adjustment
5.	Total profit (loss) on sale
6.	Amounts paid on account or in full during the year
	Amortization of premium
8.	Increase (decrease) by foreign exchange adjustment
9.	Book/adjusted carrying value of long-term invested assets at end of current period
10.	Total valuation allowance
11.	Subtotal (Lines 9 plus 10)
12.	Total nonadmitted amounts
13.	Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3).

## **SCHEDULE D - PART 1A - SECTION 1**

		Quality and Maturi	ty Distribution of All B	onds Owned December	er 31, at Book/Adjuste	d Carrying Values by N	Major Types of Issues a	and NAIC Designations	3		
l i	1	2	3	4	5	6	7	8	9	10	11
			Over 5 Years Through	Over 10 Years			Col. 6 as a	Total from Col. 6	% From Col. 7	Total Publicly	Total Privately Place
Quality Rating per the NAIC Designation	1 Year or Less	5 Years	10 Years	Through 20 Years	Over 20 Years	Total Current Year	% of Line 10.7	Prior Year	Prior Year	Traded	(a)
1. U.S. Governments, Schedules D & I											
1.1 Class 1	70,830,411	4,500,162	5,897,202	6,610,433	1,634,276	89,472,483	28.3	91,511,406	33.8	89,472,483	!
1.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	
1.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
1.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
1.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
1.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	
1.7 Totals	70,830,411	4,500,162	5,897,202	6,610,433	1,634,276	89,472,483	28.3	91,511,406	33.8	89,472,483	
2. All Other Governments, Schedules	D & DA (Group 2)										
2.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	
2.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	
2.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
2.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
2.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
2.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	
3. States, Territories and Possessions	etc., Guaranteed, Sc	hedules D & DA (Grou	ip 3)			-					
3.1 Class 1	0	. 0	0	0	0	0	0.0	0	0.0	0	
3.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	(
3.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
3.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
3.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
3.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	
4. Political Subdivisions of States, Ter	ritories and Possess	ions. Guaranteed. Sch	edules D & DA (Group	4)	· ·	· · · · · · · · · · · · · · · · · · ·		-	***	-	
4.1 Class 1	0	174,763	0	0	0	174,763	0.1	174.723	0.1	174.763	
4.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	
4.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
4.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
4.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
4.6 Class 6	0	0	0	n	0	0	0.0	n	0.0	0	
4.7 Totals	0	174.763	0	n	0	174,763	0.1	174,723	0.1	174,763	
5. Special Revenue & Special Assessr	· ·		nedules D & DA (Group	5)	Ů	17 1,700	0.1	11 1,120	0.1	11 1,700	
5.1 Class 1	8.733.346	22,429,028	14.544.106	7,283,071	1,130,656	54 , 120 , 208	17 . 1	44.778.494	16.5	54 , 120 , 208	
5.2 Class 2	n	n	Λ	n	n		0.0	n	0.0	Λ	
5.3 Class 3	 N	n	n		n	 N	0.0	 N	0.0	n	
5.4 Class 4	n	n	n	n	n	n	0.0	Λ	0.0	Λ	
5.5 Class 5	Λ	n	n	Λ	Λ	 n	0.0	 Λ	0.0	 ∩	
5.6 Class 6		n	n	Λ	n	 N	0.0	 N	0.0	Λ	
5.7 Totals	8,733,346	22,429,028	14,544,106	7,283,071	1,130,656	54,120,208	17.1	44,778,494	16.5	54,120,208	<u> </u>
J.1 LOTAIS	0,133,340	22,429,028	14,044,100	1,203,0/1	1,130,000	34,120,208	17.1	44,770,494	10.5	34,120,208	

## SCHEDULE D - PART 1A - SECTION 1 (continued)

		Quality and Maturi	ty Distribution of All B	onds Owned Decembe	r 31, at Book/Adjuste	d Carrying Values by N	Major Types of Issues	and NAIC Designations		•	
	1	2	3	4	5	6	7	8	9	10	11
			Over 5 Years Through	Over 10 Years			Col. 6 as a	Total from Col. 6	% From Col. 7	Total Publicly	Total Privately Place
Quality Rating per the NAIC Designation		5 Years	10 Years	Through 20 Years	Over 20 Years	Total Current Year	% of Line 10.7	Prior Year	Prior Year	Traded	(a)
6. Public Utilities (Unaffiliated), Scheo											
6.1 Class 1	4,850,508	1,049,052	861,526	0	0	6,761,086	2.1	3,516,486	1.3	6,761,086	
6.2 Class 2	0	590,621	267 ,828	0	0	858 , 449	0.3	567,052	0.2	858,449	!
6.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
6.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
6.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
6.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	
6.7 Totals	4,850,508	1,639,673	1,129,354	0	0	7,619,535	2.4	4,083,538	1.5	7,619,535	
7. Industrial & Miscellaneous (Unaffili	ated), Schedules D &	DA (Group 7)									
7.1 Class 1	119,321,209	15,336,848	19,675,194	1,115,536	5,450,682	160,899,468	51.0	126,764,944	46.8	160,899,468	
7.2 Class 2	504,995	1,533,968	124,623	500,000	719,427	3,383,013	1.1	3,296,461	1.2	3,383,013	(
7.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	(
7.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
7.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
7.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	(
7.7 Totals	119,826,203	16,870,816	19,799,817	1,615,536	6,170,109	164,282,481	52.0	130,061,406	48.1	164,282,481	(
8. Credit Tenant Loans, Schedules D	& DA (Group 8)	•	•								
8.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	
8.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	
8.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
8.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
8.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
8.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	(
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	(
9. Parent, Subsidiaries and Affiliates,	Schedules D & DA (G	roup 9)									
9.1 Class 1	0	L0	0	0	0	0	0.0	0	0.0	0	
9.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	
9.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	
9.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
9.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
9.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	Ů	ì

#### SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations 10 Over 1 Year Through Total from Col. 6 % From Col. 7 Total Publicly Total Privately Placed Over 5 Years Through Over 10 Years Col. 6 as a Quality Rating per the NAIC Designation Through 20 Years Over 20 Years % of Line 10.7 Prior Year 1 Year or Less 5 Years 10 Years **Total Current Year** Prior Year Traded (a) 10. Total Bonds Current Year 10.1 Class 1 .203,735,473 .43,489,853 .40,978,028 .15,009,040 .8,215,614 .311,428,008 98.7 XXX XXX .311,428,008 .504,995 ..2,124,589 ..392,451 .500,000 ..719,427 ...4,241,462 .XXX. XXX. ..4,241,462 10.2 Class 2 1.3 0.0. .XXX. 10.3 Class 3 XXX. .XXX. 10.4 Class 4 0.0. XXX. XXX 10.5 Class 5 0.0 XXX 0.0 XXX XXX 10.6 Class 6 10.7 Totals .204 , 240 , 468 45,614,442 .41,370,479 15,509,040 .8,935,041 .315,669,469 100.0 XXX XXX .315,669,469 10.8 Line 10.7 as a % of Col. 6 64.7 14.4 13.1 100.0 XXX XXX XXX 100.0 0.0 11. Total Bonds Prior Year 50.572.233 35.215.498 13.592.650 10.823.055 XXX 266.746.053 98.6 .266,746,053 156.542.617 XXX 11.1 Class 1 1.570.810 536.432 1,455,779 3.863.514 300.492 XXX XXX 3.863.514 11.2 Class 2 11.3 Class 3 XXX XXX 0.0 11.4 Class 4 XXX XXX 0.0 11.5 Class 5 XXX XXX 0.0 11.6 Class 6 XXX XXX 0.0 .156,843,109 .13,592,650 .12,278,835 XXX .XXX. ..270,609,566 11.7 Totals .52,143,043 .35,751,930 .100.0 .270,609,566 11.8 Line 11.7 as a % of Col. 8 58.0 19.3 13.2 XXX XXX 100.0 XXX 100.0 0.0 4.5 12. Total Publicly Traded Bonds .311.428.008 12.1 Class 1 203,735,473 40.978.028 .15.009.040 8.215.614 .98.7 266.746.053 98.6 .311.428.008 XXX 12.2 Class 2 504.995 .2,124,589 .392,451 500.000 .719,427 4.241.462 1.3 ...3,863,514 4.241.462 XXX 12.3 Class 3 0 0 XXX 0.0 0.0 XXX 12.4 Class 4 0.0 XXX 12.5 Class 5 0.0 0.0 XXX 12.6 Class 6 0.0 100.0 12.7 Totals 204.240.468 45.614.442 .41,370,479 15,509,040 .8,935,041 .315,669,469 .270,609,566 .315,669,469 XXX 12.8 Line 12.7 as a % of Col. 6 64. 14.4 13.1 4.9 2.8 100.0 XXX XXX XXX 100.0 XXX 12.9 Line 12.7 as a % of Line 10.7. 64.7 14.4 13.1 4.9 2.8 100.0 XXX XXX 100.0 XXX Col. 6, Section 10 13. Total Privately Placed Bonds 0.0 XXX 13.1 Class 1 13.2 Class 2 0.0 0.0 XXX 13.3 Class 3 0.0 0.0 XXX 13.4 Class 4 0.0 0.0 XXX XXX 13.5 Class 5 0 0.0 0.0 XXX 13.6 Class 6 0 0.0 0 0 13.7 Totals 0 0.0 0.0 XXX 13.8 Line 13.7 as a % of Col. 6 0.0 0.0 0.0 0.0 0.0 0.0 XXX XXX XXX XXX. .0.0 13.9 Line 13.7 as a % of Line 10.7. 0.0 0.0 0.0 XXX 0.0 0.0 XXX XXX XXX 0.0 Col. 6. Section 10

5.6 Other 5.7 Totals

#### ANNUAL STATEMENT FOR THE YEAR 2007 OF THE Priority Health

#### **SCHEDULE D - PART 1A - SECTION 2**

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues 8 Total from Col 6 % From Col. Total Publicly Over 1 Year Over 5 Years Over 10 Years Col. 6 as a % Total Privately Through 5 Years Through 10 Years Distribution by Type 1 Year or Less Through 20 Years Over 20 Years Total Current Year of Line 10.7 Prior Year Prior Year Traded Placed 1, U.S. Governments, Schedules D & DA (Group 1) 1,599,673 .88,228,626 70,659,097 3,989,175 .6,399,183 .88,228,627 .90,067,822 .33.3 1.1 Issuer Obligations 171.314 510,988 315,703 211,250 34,603 1,243,858 1,443,584 0.5 1,243,857 1.2 Single Class Mortgage-Backed/Asset-Backed Securities 0.4 70,830,411 4,500,163 5,897,202 6,610,433 28.3 33.8 89,472,483 1,634,276 89,472,485 91,511,406 1.7 Totals 2. All Other Governments, Schedules D & DA (Group 2) 0 0 0.0 2.1 Issuer Obligations . ..0.0 .0.0 2.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES 2.3 Defined 0.0 0.0 0.0 2.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES 0.0 2.5 Defined 2.6 Other 0 0.0 0.0 0.0 0.0 2.7 Totals 3. States. Territories, and Possessions Guaranteed, Schedules D & DA (Group 3) 3.1 Issuer Obligations 0 0 0 0 ..0..0 .0.0 3.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES 3.3 Defined ..0.0 0.0. ..0.0 3.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES 3.5 Defined .0.0 0.0 0.0 3.6 Other 0 0 0 0 0 0 0.0 0.0 3.7 Totals 4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4) 174,763 174,723 .174,763 .174,763 0.1 4.1 Issuer Obligations 4.2 Single Class Mortgage-Backed/Asset-Backed Securities 0.0 .0.0 MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES 4.3 Defined 0.0 .0.0 0.0 .0.0 4.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES ..0.0 4.5 Defined 0.0 0.0 4.6 Other 174,763 174,763 0.1 174,763 4.7 Totals 174,723 0.1 5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5) ..0.6 .2,000,000 .3,000,254 1.0 .1,500,878 .3,000,254 5.1 Issuer Obligations .1,000,254 .7,221,038 .22,215,923 .12,544,106 ..7,283,071 1,130,656 .50,394,794 .16.0 .42,303,695 .15.6 .50,394,794 5.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES .512,055 .725,160 .213,105 .725.160 .973.921 .0.4 5.3 Defined .0.2 5.4 Other 0.0 .0.0 MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES .0.0 5.5 Defined

7,283,071

1,130,656

54,120,208

8,733,347

22,429,028

14.544.106

0.0

16.5

54,120,208

0.0

44.778.494

# SCHEDULE D - PART 1A - SECTION 2 (continued) Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

	1	Maturity Distribution	O All Bollas Ownea	December 51, at book	Aujusted Carrying va	lues by Major Type an	u oubtype or is	ues			
	1	2	3	4	5	6	7	8	9	10	11
		Over 1 Year Through	Over 5 Years	Over 10 Years			Col. 6 as a	Total from Col. 6	% From Col. 7	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Total Current Year	% of Line 10.7	Prior Year	Prior Year	Traded	Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (											
6.1 Issuer Obligations	4,850,508	1,639,673	1,129,354	0	0	7 , 619 , 535	2.4	4,083,538	1.5	7 , 619 , 535	0
6.2 Single Class Mortgage-Backed/Asset-Based											
Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
6.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
6.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	4,850,508	1,639,673	1,129,354	0	0	7,619,535	2.4	4,083,538	1.5	7,619,535	0
7. Industrial & Miscellaneous (Unaffiliated), Schedul											
7.1 Issuer Obligations	114,816,524	10,438,694	8,008,286	1,612,028	6, 170, 109	141,045,641	447	115 , 561 , 017	42.7	141,045,641	0
7.2 Single Class Mortgage-Backed/Asset-Based Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
7.3 Defined	128,692	311,363	114,534	3,508	0	558,097	0.2	659,181	0.2	558,096	0
7.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
7.5 Defined	1,625,942	4,129,000	11,676,998	0	0	17,431,940	5.5	12,482,803	4.6	17 , 431 , 940	0
7.6 Other	3,255,045	1,991,759	0	0	0	5,246,804	1.7	1,358,406	0.5	5,246,804	0
7.7 Totals	119,826,203	16,870,816	19,799,818	1,615,536	6,170,109	164,282,482	52.0	130,061,406	48.1	164,282,481	0
8. Credit Tenant Loans, Schedules D & DA (Group 8	3)										
8.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parents, Subsidiaries and Affiliates, Schedules D	& DA (Group 9)										
9.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Single Class Mortgage-Backed/Asset-Based Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
9.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Other	0	0	0	Ω	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
9.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

## SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues												
	1	2	3	4	5	6	7	8	9	10	11	
		Over 1 Year	Over 5 Years	Over 10 Years		Total		Total From Col. 6		Total Publicly	Total Privately	
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Current Year	of Line 10.7	Prior Year	Prior Year	Traded	Placed	
10. Total Bonds Current Year												
10.1 Issuer Obligations	191,326,383	16,242,305	16,719,139	8,011,211	7,769,782	240,068,820	76 . 1	XXX	XXX	240,068,819	0	
10.2 Single Class Mortgage-Backed/Asset-Backed Securities	7,392,352	22,726,911	12,859,809	7,494,321	1, 165, 259	51,638,652	16.4	XXX	XXX	51,638,651	0	
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES												
10.3 Defined	640 ,747	524,468	114,534	3,508	0	1,283,257	0.4	XXX	XXX	1,283,256	0	
10.4 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0	
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES												
10.5 Defined	1,625,942	4, 129,000	11,676,998	0	0	17,431,940	5.5	XXX	XXX	17,431,940	0	
10.6 Other	3,255,045	1,991,759	0	0	0	5,246,804	1.7	XXX	XXX	5,246,804	0	
10.7 Totals	204,240,469	45,614,443	41,370,480	15,509,040	8,935,041	315,669,473	100.0	XXX	XXX	315,669,470	0	
10.8 Line 10.7 as a % of Col. 6	64.7	14.5	13.1	4.9	2.8	100.0	XXX	XXX	XXX	100.0	0.0	
11. Total Bonds Prior Year												
11.1 Issuer Obligations	149,321,112	26 . 401 . 847	17 . 240 . 877	7 , 105 , 083	11,319,060	XXX	XXX	211.387.978	78.1	211.387.978	0	
11.2 Single Class Mortgage-Backed/Asset-Backed Securities	6,441,218	19,090,861	10,780,940	6 , 474 , 485	959,775	XXX	XXX	43,747,278	16.2	43,747,278	0	
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	,=	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						I				
11.3 Defined	763.866	718,649	137,505	13.081	0	XXX	XXX	1,633,101	0.6	1,633,101	0	
11.4 Other	0	0	0	0	0	XXX	XXX	0	0.0	0	0	
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES												
11.5 Defined	110.403	4.779.792	7.592.609	0	0	XXX	XXX	12.482.803	4.6	12.482.803	0	
11.6 Other	206,511	1,151,895	0	0	0	XXX	XXX	1,358,406	0.5	1,358,406	0	
11.7 Totals	156,843,109	52,143,043	35.751.930	13,592,650	12.278.835	XXX	XXX	270,609,566	100.0	270,609,566	0	
11.8 Line 11.7 as a % of Col. 8	58.0	19.3	13.2	5.0	4.5	XXX	XXX	100.0	XXX	100.0	0.0	
12. Total Publicly Traded Bonds	0010	1010	.0.2	0.0		7001	7001	10010	7000	10010	0.0	
12.1 Issuer Obligations	191,326,383	16,242,304	16,719,139	8,011,211	7 ,769 ,782	240,068,819	76 . 1	211,387,978	78.1	240,068,819	XXX	
12.2 Single Class Mortgage-Backed/Asset-Backed Securities	7 . 392 . 352	22.726.911	12.859.809	7 . 494 . 321	1,165,259	51.638.652	16.4	43.747.278	16.2		XXX	
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	7 ,002,002		12,000,000		1, 100,200	01,000,002			10.2	01,000,002		
12.3 Defined	640.747	524 . 468	114.534	3.508	0	1,283,257	0.4	1,633,101	0.6	1,283,257	XXX	
12.4 Other	0	0	0	0,000	0	1,200,207	0.0	1,000,101	0.0	1,200,207	XXX	
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES												
12.5 Defined	1,625,942	4.129.000	11,676,998	0	0	17 . 431 . 940	5.5	12,482,803	4.6	17 . 431 . 940	XXX	
12.6 Other	3.255.045	1.991.759	0	0	0	5.246.804	1.7	1.358.406	0.5	5.246.804	XXX	
12.7 Totals	204.240.469	45,614,442	41.370.480	15 . 509 . 040	8.935.041	315.669.472	100.0	270.609.566	100.0	315.669.472	XXX	
12.8 Line 12.7 as a % of Col. 6	64.7	14.5	13.1	4.9	2.8	100.0	XXX	XXX	XXX	100.0	XXX	
12.9 Line 12.7 as a % of Coi. 6, Section 10	64.7	14.5	13.1	4.9	2.8	100.0	XXX	XXX	XXX	100.0	XXX	
13. Total Privately Placed Bonds	Q+.1	14.0	10.1	7.0	2.0	100.0	7777	7777	7////	100.0	7777	
13.1 Issuer Obligations	0	n	n	0	n	n	0.0	0	0.0	XXX	n	
13.1 Issuer Obligations  13.2 Single Class Mortgage-Backed/Asset-Backed Securities	 N		ν			 N	0.0		0.0	XXX	n	
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	υ	u	J								İ	
13.3 Defined	n	n	n	0	n	n	0.0	0	0.0	XXX	0	
13.4 Other	 N	 N	Q	 0	 N	 n	0.0		0.0	XXX	n	
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	υ										υ	
13.5 Defined	n	n	n	0	Λ	n	0.0	n	0.0	XXX	0	
13.6 Other	0	0 ∩	 O	0	0 ∩	0 n	0.0	0		XXX	 Λ	
13.7 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0	
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0	
	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0	
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	ΛΛΛ	۸۸۸	۸۸۸	۸۸۸	0.0	

## **SCHEDULE DA - PART 2 - VERIFICATION BETWEEN YEARS**

	Short-Term Investments				
	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets(a)	Investments in Parent, Subsidiaries and Affiliates
Book/adjusted carrying value, prior year	141,855,430	141,855,430	0	0	0
Cost of short-term investments acquired		357,435,116	0	0	0
3. Increase (decrease) by adjustment	942,247	942,247	0	0	0
Increase (decrease) by foreign exchange adjustment	0	0	0	0	0
5. Total profit (loss) on disposal of short-term investments	100	100	0	0	0
Consideration received on disposal of short-term investments		318,988,692	0	0	0
7. Book/adjusted carrying value, current year	181,244,200	181,244,200	0	0	0
Total valuation allowance	0	0	0	0	0
9. Subtotal (Lines 7 plus 8)	181,244,200	181,244,200	0	0	0
10. Total nonadmitted amounts	0	0	0	0	0
11. Statement value (Lines 9 minus 10)	181,244,200	181,244,200	0	0	0
12. Income collected during year	8,615,891	8,615,891	0	0	0
13 Income earned during year	8 515 762	8 515 762	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - VBY

NONE

Schedule DB - Part B - VBY NONE

Schedule DB - Part C - VBY NONE

Schedule DB - Part D - VBY NONE

Schedule DB - Part E - VBY NONE

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

Schedule S - Part 1 - Section 2

NONE

Schedule S - Part 2

NONE

## **SCHEDULE S - PART 3 - SECTION 2**

			Re	einsurance Ceded Accident and Health Insu								
1	2	3	4	5	6	7	8	9	Outstanding	Surplus Relief	12	13
NAIC								Reserve Credit	10	11	Modified	
Company	Federal ID						Unearned Premiums	Taken Other than for			Coinsurance	Funds Withheld
Code	Number	Effective Date	Name of Company	Location	Type	Premiums	(Estimated)	Unearned Premiums	Current Year	Prior Year	Reserve	Under Coinsurance
92711	35-1817054	09/01/2007	HCC Life Insurance Company.	Kennesaw, GA.	SSL/1/A	894,839						
	- Total Authorize - Total Authorize		- Non-Affiliates			894,839 894,839						
			d General Account			894,839						
0100000	TOTAL NATION 120	d dild olidatiloi 120	d contrar hoodant		I	001,000						
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1599999	9 Totals					894,839						

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## **SCHEDULE S - PART 4**

	Reinsurance Ceded to Unauthorized Companies													
1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7	8 Total (Cols. 5+6+7)	9	10 Trust Agreements	Funds Deposited by and Withheld from Reinsurers	12 Other	13 Miscellaneous Balances (Credit)	14 Sum of Cols 9+10+11+12+13 But Not in Excess of Col. 8	
	· · · · · · · · · · · · · · · · · · ·													
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1199999	Total	-	-											

# Schedule S-Part 5 Five-Year Exhibit of Reinsurance Ceded Business (000 Omitted)

		(000 C	millea)			
		1 2007	2 2006	3 2005	4 2004	5 2003
Α. (	OPERATIONS ITEMS					
1.	Premiums	888	1,837	691	1,056	1,517
2.	Title XVIII-Medicare	7	0	0	0	0
3.	Title XIX-Medicaid.	0	0	0	0	0
4.	Commissions and reinsurance expense allowance		0	0	0	0
5.	Total hospital and medical expenses	1 ,686	1,131	156	161	1,299
В. І	BALANCE SHEET ITEMS					
6.	Premiums receivable		0	0	0	0
7.	Claims payable		0	0	0	0
8.	Reinsurance recoverable on paid losses	0	357	0	0	139
9.	Experience rating refunds due or unpaid		0	0	0	0
10.	Commissions and reinsurance expense allowances unpaid		0	0	0	0
11.	Unauthorized reinsurance offset	0	0	0	0	0
	JNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
	Funds deposited by and withheld from (F)			0	0	0
13.	Letters of credit (L)	0	0	0	0	0
14.	Trust agreements (T)	0	0	0	0	0
15.	Other (O)	0	0	0	0	0

## **SCHEDULE S-PART 6**

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	restatement of Bulance enest to lacining free en	1	2	3
		As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 10)	366,664,501	894,839	367 , 559 , 340
2.	Accident and health premiums due and unpaid (Line 13)	12,022,578		12,022,578
3.	Amounts recoverable from reinsurers (Line 14.1)	0		0
4.	Net credit for ceded reinsurance.	XXX	(894,839)	(894,839)
5.	All other admitted assets (Balance)	13,162,396		13,162,396
6.	Total assets (Line 26)	391,849,475	0	391,849,475
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)	103,382,443	0	103,382,443
8.	Accrued medical incentive pool and bonus payments (Line 2)	17,652,309		17,652,309
9.	Premiums received in advance (Line 8)	26,652,915		26,652,915
10.	Funds held under reinsurance treaties with authorized and unauthorized insurers (Line 17)	0		0
11.	Reinsurance in unauthorized companies (Line 18).	0		0
12.	All other liabilities (Balance)	28,712,851		28,712,851
13.	Total liabilities (Line 22)	176,400,518	0	176,400,518
14.	Total capital and surplus (Line 31)	215,448,957	XXX	215,448,957
15.	Total liabilities, capital and surplus (Line 32)	391,849,475	0	391,849,475
	NET CREDIT FOR CEDED REINSURANCE			
16.	Claims unpaid	0		
17.	Accrued medical incentive pool	0		
18.	Premiums received in advance	0		
19.	Reinsurance recoverable on paid losses	0		
20.	Other ceded reinsurance recoverables	(894,839)		
21.	Total ceded reinsurance recoverables	(894,839)		
22.	Premiums receivable	0		
23.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
24.	Unauthorized reinsurance	0		
25.	Other ceded reinsurance payables/offsets	0		
26.	Total ceded reinsurance payables/offsets	0		
27.	Total net credit for ceded reinsurance	(894,839)		

# SCHEDULE T – PART 2 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN Allocated by States and Territories

Allocated by States and Territories  Direct Business Only												
		1 Life (Group and	2 Annuities (Group	3 Disability Income (Group and	4 Long-Term Care (Group and	5 Deposit-Type	6					
States, Etc.		Individual)	and Individual)	Individual)	Individual)	Contracts	Totals					
1. Alabama	AL											
2. Alaska	AK											
3. Arizona	AZ											
4. Arkansas	AR											
5. California	CA											
6. Colorado	CO											
7. Connecticut	CT											
8. Delaware	DE											
District of Columbia												
10. Florida												
11. Georgia	GA											
12. Hawaii												
13. Idaho	П											
14. Illinois		·····	·		}	l	}					
15. Indiana												
16. lowa	IA											
17. Kansas	KS		-		}	<b>}</b>	ļ					
18. Kentucky												
19. Louisiana			-									
20. Maine	ME											
21. Maryland	MD											
22. Massachusetts	MA											
22. Massachusetts 23. Michigan 24. Minnesota	MI											
24. Minnesota	MN											
25. Mississippi												
26. Missouri												
27. Montana												
28. Nebraska												
29. Nevada												
30. New Hampshire												
31. New Jersey												
•												
32. New Mexico					• • • • • • • • • • • • • • • • • • • •							
33. New York												
34. North Carolina												
35. North Dakota	ND											
36. Ohio	OH											
37. Oklahoma	OK											
38. Oregon	OR											
39. Pennsylvania	PA		<b>.</b>		<b></b>	ļ	<b>.</b>					
40. Rhode Island	RI											
41. South Carolina												
42. South Dakota		[	<u> </u>				<u> </u>					
43. Tennessee	TN											
44. Texas	TX											
45. Utah												
46. Vermont	VT			•		1						
47. Virginia				• • • • • • • • • • • • • • • • • • • •								
48. Washington												
•												
49. West Virginia												
50. Wisconsin						<b> </b>						
51. Wyoming												
52. American Samoa												
53. Guam							ļ					
54. Puerto Rico	PR											
55. U.S. Virgin Islands	VI											
56. Northern Mariana Islands												
57. Canada												
58. Aggregate Other Alien	OT											

# SCHEDULE Y PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

PART 2 - SUMMART OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES												
1	2	3	4	5	6	7 Income/	8	9	10	11	12	13
NAIC					Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage	(Disbursements) Incurred in Connection with Guarantees or Undertakings for the	Management	Income/ (Disbursements) Incurred Under		Any Other Material Activity Not in the		Reinsurance Recoverable/ (Payable) on Losses and/or Reserve
Company	Federal ID		Shareholder	Capital	Loans or Other	Benefit of any	Agreements and	Reinsurance		Ordinary Course of the Insurer's		Credit
Code	Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Dividends	Contributions	Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
95561	38 - 27 15 5 2 0	Priority Health Managed Benefits Priority Health Insurance Company Trinity Health Plans		(4,000,000)			(95,514,719) 94,737,535				(99,514,719) 94,737,535	
11520	32 0016523	Priority Health Incurance Company		4,000,000			94,737,535			•		
12208	32-0016523 20-1529553	Trinity Health Plans		4,000,000							844,902	
12200	20 1023000	THITTY HOUTER FRANCE					044,002		*			
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9999999 (	ontrol Totals		0	0	0	0	0	0	XXX	Ü	0	0

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions

	MARCH FILING	Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will an actuarial opinion be filed by March 1?	YES.
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
	JUNE FILING	
8.	Will an audited financial report be filed by June 1?	YES
which t	lowing supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the special report must be filed, your response of <b>NO</b> to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code ment is required of your company but is not filed for whatever reason enter <b>SEE EXPLANATION</b> and provide an explanation following the interrogatory	will be printed below. If the
	MARCH FILING	
9.		NO
10.		NO
11.		N0
12.		N0
13.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
	APRIL FILING	
14.		NO
15.		N0
16.	Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	N0
11. 12. 13. 14.		
BAR C	ODE:	
9.		
10.		
11.		
12.		
13.		
14.		
15.		

## **OVERFLOW PAGE FOR WRITE-INS**

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